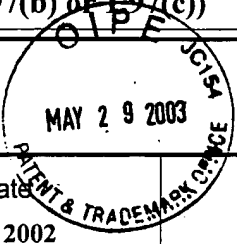


3736

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c))			Docket No. SPEC-6137	
In Re Application Of: KRUEGER				
Serial No. 10/037,795	Filing Date 3 January 2002	Examiner	Group Art Unit 3736	
Title: BONE MARROW ASPIRATION DEVICE WITH CURVED TIP				
<div style="text-align: center;">Address to: Assistant Commissioner for Patents Washington, D.C. 20231</div> <div style="text-align: right;">RECEIVED JUN 02 2003 TECHNOLOGY CENTER R3700</div>				
<p style="text-align: center;">37 CFR 1.97(b)</p> <p>1. <input checked="" type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application; within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or before the mailing date of a first Office Action on the merits, whichever event occurs last.</p> <p style="text-align: center;">37 CFR 1.97(c)</p> <p>2. <input type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed after three months of the filing of a national application, or the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or after the mailing date of a first Office Action on the merits, whichever occurred last but before the mailing date of either:</p> <p style="margin-left: 40px;">1. a Final Action under 37 CFR 1.113, or</p> <p style="margin-left: 40px;">2. a Notice of Allowance under 37 CFR 1.311,</p> <p style="margin-left: 40px;">whichever occurs first.</p> <p>Also submitted herewith is:</p> <p><input type="checkbox"/> a certification as specified in 37 CFR 1.97(e);</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> the fee set forth in 37 CFR 1.17(p) for submission of an Information Disclosure Statement under 37 CFR 1.97(c).</p>				



4

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
(Under 37 CFR 1.97(b) and 1.97(c))

Docket No.
SPEC-6137

In Re Application Of: **KRUEGER**

Serial No.
10/037,795

Filing Date
3 January 2002

Examiner

Group Art Unit
3736

Title: **BONE MARROW ASPIRATION DEVICE WITH CURVED TIP**

Payment of Fee

(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))

- ☐ A check in the amount of _____ is attached.
- ☒ The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. **01-0485** as described below. A duplicate copy of this sheet is enclosed.
- ☐ Charge the amount of _____
- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.

Certificate of Transmission by Facsimile*

I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. _____) on _____ (Date)

Signature

Typed or Printed Name of Person Signing Certificate

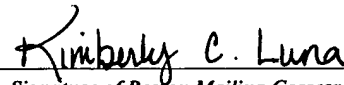
*This certificate may only be used if paying by deposit account.


Signature

ANDREW G. ROZYCKI Reg no. 36,406

Certificate of Mailing by First Class Mail

I certify that this document and fee is being deposited on **23 May 2003** with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.


Signature of Person Mailing Correspondence

Kimberly C. Luna

Typed or Printed Name of Person Mailing Correspondence

Dated: **22** May 2003

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